FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL
OMB Number: 3235-0076
Expires: December 31, 1993
Estimated average burden
hours per form 16.00

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

							
Name of Offering (;; ch	eck if this is an	amendment an	d name has ch	anged, and in	dicate change.)		
Filing Under (Check box(es) that apply):	☐ Rule 504	☑ Rule 505	☐ Rule 506	☐ Section 4(6)	O ULO	E
Type of Filing: New F	iling Ame	endment					
		A. BASIC	IDENTIFICA	TION DATA			
1. Enter the information rec	quested about th	ie issuer					
Name of Issuer (☐ check Greenleaf Limited			ame has chan	ged, and indica	ate change.)	a.	
Address of Executive Office	s (Number and St	reet, City, Sta	te, Zip Code)	Telephone Numb	er (Includi	ng Area Code)
3175 Commercial A	venue, Nor	thbrook, I	L 60062		(847) <u>2,0</u> 5–12	200	
Address of Principal Busine (if different from Executive		Number and St	reet, City, Sta	e, Zip Code)	Telephone Numb	er (Includi	ng Area Code)
Brief Description of Busines Ownership and ope		racidantia	1 real est	ate devel	JUL 0	3 2002	
			Trear est	.ace dever	164	LECTION.	<i>,</i> ^
Type of Business Organization		ad marta archim	aleands. Carma				PPOOR
□ corporation		ed partnership,	•	·u	🗆 other (please_sp	ecify):	PROCESSED
☐ business trus:	□ limite	ed partnership,	to be formed				7 1111 2000
			Month	Year		·	1 JUL 2 8 2002
Actual or Estimated Date of	-			_		timated	THOMSON
Jurisdiction of Incorporation	i or Organizatio		etter U.S. Pos ada; FN for o			I	FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: X Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Katz Bros. Development, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 3175 Commercial Avenue, Northbrook, IL Check Box(es) that Apply: Promoter Executive Officer ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Katz, David Business or Residence Address (Number and Street, City, State, Zip Code) 3175 Commercial Avenue, Northbrook, IL Director 🖰 ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter . Beneficial Owner ☐ General and/or Managing Partner Full Name (Last name first, if individual) Katz, Ralph Business or Residence Address (Number and Street, City, State, Zip Code) 3175 Commercial Avenue, Northbrook, IL Check Box(es) that ☐ Promoter ☐ Beneficial Owner Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Katz, Abraham Business or Residence Address (Number and Street, City, State, Zip Code) 3175 Commercial Avenue, Northbrook, IL Executive Officer Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Schulz, Edward Business or Residence Address (Number and Street, City, State, Zip Code) 3175 Commercial Avenue, Northbrook, IL ☐ Beneficial Owner Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Cohen, Gadi Business or Residence Address (Number and Street, City, State, Zip Code) 3175 Commercial Avenue, Northbrook, IL Executive Officer Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Weiss, Nathan Business or Residence Address (Number and Street, City, State, Zip Code) 3175 Commercial Avenue, Northbrook, IL 60062

				∗ В.	INFORM	ATION A	BOUT OF	FERING					ing Ngjarja
1. Ha	s the issuer	sold, or a	does the is	suer intend	i to sell, to	o non-accr	edited inv	estors in th	nis offering	?	• • • • • • • •	Yes X	No
	•					dix, Colun							
2. Wh	at is the m	iinimum ir	vestment	that will b	e accepted	from any	individua	1?				<u>s 10</u>	,000
												Yes	No
	es the offer												
sion to t list	er the infor n or similar pe listed is a the name of dealer, you	remunerat an associat of the brok	ion for sol ed person er or deal	icitation of or agent o er. If more	f purchaser f a broker than five	or dealer (5) person	ction with registered is to be lis	sales of sec with the Sl ted are ass	urities in tl EC and/or	ne offering with a sta	. If a perso te or state	on es,	
Full Nan	ne (Last na	me first, i	f individu:	al)	* * * * * * * * * * * * * * * * * * * *								
Business	or Residen	ce Addres	s (Number	and Stree	t, City, St	ate, Zip C	ode)						
Name of	Associated	Broker o	r Dealer	·									
States in	Which Per	so:: Listed	Has Solid	cited or In	tends to S	olicit Purc	hasers						
(Check	"All State	s'' or che	ck individ	ual States)								□ All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE] [SC]	[NV] [SD]	[NH]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam	e (Last nar	ne first, if	individua	1)									
Business	or Residen.	dress	(Number	and Street	ı, City, Sta	ate, Zip Co	ode)						
Name of	Associated	Broker or	Dealer										
States in	Which Pers	son Listed	Has Solic	ited or Int	ends to Sc	olicit Purch	nasers			·····			
(Check	"All State	s" or chec	k individu	al States)		• • • • • • • • • • • • • • • • • • •						□ All St	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	(MN) (OK)	[MS]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[W1]	[WY]	[PR]	
Full Nam	e (Last nan	ne first, if	individua	()									
Business (or Residenc	e Address	(Number	and Street	, City, Sta	ite, Zip Co	ode)		····				
Name of	Associated	Broker or	Dealer									 	
States in '	Which Pers	on Listed	Has Solici	ted or Inte	ends to So	licit Purch	asers	· · · · · · · · · · · · · · · · · · ·			·		
	"All States										• • • • • •	□ All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	{ HI }	[ID]	
[IL]	[IN]	[IA]	[KS]	{KY}	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE] [SC]	[NV] [SD]	[HH] [TN]	[NJ] [TX]	[MM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK]	[OR] [WY]	[PA] [PR]	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

J	already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	S
	Equity	S	S
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$ 10,000,000	\$ 10,000,000
	Other (Specify)	\$	\$
	Total	<u>\$ 10,000,000</u>	<u>\$ 10,000,00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	149	9 ,750,000
	Non-accredited Investors	5	s 250,000
	Total (for filings under Rule 504 only)		s 10,000,000
	ver also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is a offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505	<u>Limited</u> Partnership	\$ 10,000,000
	Regulation A		\$
	Rule 504		S
	Total	<u> </u>	\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$·
	Legal Fees	🗗	<u>\$ 25,000</u>
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	<u>E</u>	S
	Other Expenses (identify) Miscellaneous		<u>\$ 5,000</u>
	Total		<u>\$ 30,000</u>

C. OFFERING PRICE, NUMBE	ER OF INVESTORS, EXPENSES AND	USE OF PROC	CEEDS
b. Enter the difference between the aggregate off tion I and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference	is the	s <u>9,970,000</u>
5. Indicate below the amount of the adjusted gross used for each of the purposes shown. If the amount estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set forth	unt for any purpose is not known, furnite. The total of the payments listed must	ish an equal	
the adjusted gross proceeds to the issuer see form	i in response to Part C - Question 4.0 a	Payment Officer Directors Affiliat	s, , & Payments To
Salaries and fees		□ \$	D \$
Purchase of real estate		□ \$	<u>\$</u> 9,623,000
Purchase, rental or leasing and installation of	machinery and equipment	□ \$	D \$
Construction or leasing of plant buildings and	facilities	□ \$	\$
Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	assets or securities of another	·	🗆 \$
Repayment of indebtedness			
Working capital			
Other (specify): Loan fees, survey escrow	and title costs, tax	\$	<u> </u>
		□ \$	<u> </u>
Column To: 's		□ \$	D \$
Total Pa Listed (column totals added)		ם:	9,970,000
ZII - Jakonikovino i	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed by following signature constitutes an undertaking by the isquest of its staff, the information furnished by the issuer.	the undersigned duly authorized person.	If this notice is d Exchange Con	nmission, upon written re-
Issuer (Print or Type)	Signature	1	Date
Greenleaf Limited Partnership	Doned W		6/ 27 /02
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
David Katz	Member, Katz Bros. Develo	opment, LLC	

Sole Member of Sole General Partner

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

4 Yani 1 11 ji	E. STATE SIGNATURE		
ł.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?		No KD
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, Form D (17 CFR 239.500) at such times as required by state law.	a noti	ce on

- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Greenleaf Limited Partnership	Signature Jacual Cax	Date 6/27/02
Name (Print or Type)	Title (Print or Type)	
David Katz	Member - Katz Bros. Development, L	LC

Sole Member of Sole General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2 3 4								5
	to non-a investor	i to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Type of investor and amount purchased in State (Part C-Item 2) Number of Number of				Disqualification under State ULC (if yes, attach explanation of waiver granted (Part E-Item1)	
				Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL									
AK								· · · · · · · · · · · · · · · · · · ·	
AZ	X		Part. Interes \$100,000	t 2	100,000				Х
AR									
CA	X		Part. Interes \$175,000	1	175,000				
со	X		Part. Interes \$50,000	t 1	50,000				X
СТ									
DE									
DC									
FL	X		Part. Interes \$50,000	t 8	350,000				X
GA			<u> </u>						:
HI								· .	
ID						1. p. 1.			
IL	X		Part. Interes \$1,475,000	t -136	875,000	4	225,000		X
IN									
IA									
KS									
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LA									
ME									
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МА									
MI	Х		Part. Interes \$50,000	1	50,000				X
MN									
MS									
МО									

APPENDIX

	T	2	3	Γ		4		Т	5
	Intend to non-a investor	d to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item1)	Number of	Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item1)				
				Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
MT		ļ							-
NE						<u> </u>		<u> </u>	ļ
NV									
NH									
NJ			·						
NM					· · · · · · · · · · · · · · · · · · ·				
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VT									
VA									
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WI									
WY									
PR									